

CARE & TREATMENT FOR PEOPLE WHO USE DRUGS



People who use drugs are one of the most stigmatised and marginalised population groups. The situation is even more difficult for young people and women who use drugs with the result that they are often under-represented on harm reduction programmes, as well as in HIV prevention, testing and treatment services.

Moreover, existing interventions, such as needle and syringe exchange programmes and opiate substitution treatment, do not address the needs of people who use non-injecting or inhaled drugs. These new drug consumption practices are causing particular concern, as they are often found among population categories with insufficient access to care and treatment.

In this context, Expertise France is financing or implementing long-term projects and supporting organisations that seek to assist these people and address the challenges of new consumption practices, such as the inhaling of drugs like crack and heroin, notably in West Africa, or the use of synthetic substances, frequent among young people in South-East Asia.



**THE SITUATION
IS EVEN MORE
DIFFICULT
FOR YOUNG PEOPLE
AND WOMEN
WHO USE DRUGS**



The World Health

Organization defines people who inject drugs (PWID) as people who inject non-medically allowed psychotropic substances. These substances include opioids, amphetamine-type stimulants, cocaine, hypno-sedatives and hallucinogens. Injection may be through intravenous, intramuscular, subcutaneous or other injectable routes.

KEY FIGURES



■ 1 in 20 adults use drugs worldwide

■ 14% of drug users are living with HIV

■ 11.7 million people inject drugs

■ 1 in 7 drug users are living with HIV

■ 1 in 2 drug users are living with hepatitis C

SOME DEFINITIONS AND KEY FIGURES

The French Institute for Public Health Surveillance defines drugs as any psychoactive substance capable of modifying a person's physical or psychological functions, i.e. mood, thoughts, behaviour or emotions. The different criteria used for classifying drugs are their therapeutic properties, the dependence they cause and their effects on the central nervous system. The legal classification of drugs determines the conditions in which their use is legal or illegal. Drug use covers a very wide range of products, practices, profits and consumption settings. The European Monitoring Centre for Drugs and Drug Addiction (EMCCDA) has suggested a way of formalising the different degrees of drug use: experimental, past 12-months, regular and problematic¹.

According to WHO, on average, 1 in 10 new HIV infections is caused by injecting drugs and in some Eastern European and Central Asian countries, 80% of all HIV infections are linked to drug consumption². Thus, according to UNAIDS, in 2014, HIV prevalence was 28 times higher in injecting drug users than in the population at large. People who inject drugs intravenously are particularly vulnerable to HIV/AIDS due to contamination through syringe sharing.

At the end of the 1980s, growing awareness of the vulnerability of people who inject drugs (PWIDs) to HIV/AIDS led to the development of harm reduction policy. Harm reduction is a set of practical public health strategies and ideas seeking to reduce the negative consequences of drug consumption but which do not insist on quitting or abstinence³. Harm reduction tools include access to sterile syringes, the distribution of opiate substitution treatment (Subutex) and access to health care, with the creation of the first low threshold services.

1. Santé Publique France, special feature « Usagers de drogues [People who use drugs]» <http://invs.santepubliquefrance.fr/Dossiers-thematiques/Populations-et-sante/Usagers-de-drogues/Definitions>

2. WHO, « HIV and people who inject drugs », www.who.int/hiv/topics/idu/about/fr/

3. French Inter-ministerial mission for the fight against drugs and psychoactive substances: www.drogues.gouv.fr/comprendre/ce-qu-il-faut-savoir-sur/la-reduction-des-risques

TOWARDS INTEGRATED SERVICES FOR PEOPLE WHO USE DRUGS

CEPIAD, AN INTEGRATED DRUG TREATMENT CENTRE IN DAKAR (CEPIAD)

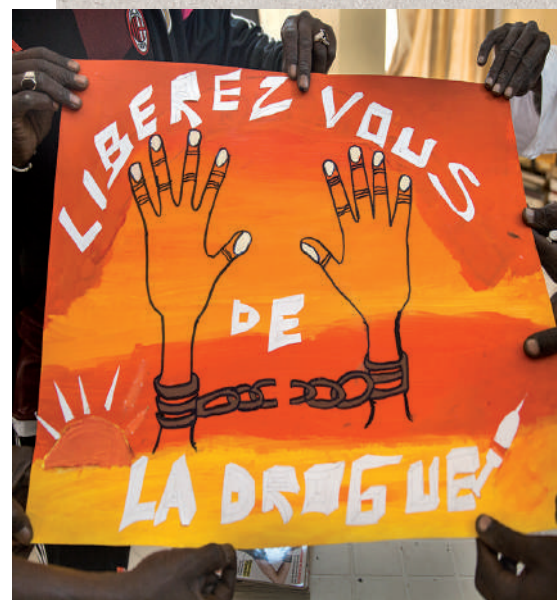
The UDSEN study⁴ conducted from April to July 2011 in the Dakar region (Senegal) produced the country's first reliable quantitative and qualitative data on Injecting Drug Users (IDU). This study highlighted the urgent need to set up an integrated drug treatment centre which would provide integrated services adapted to people who inject drugs (PWIDs), employing harm reduction strategies and dispensing methadone substitution treatment.

Consequently, Expertise France supported the creation of *the Centre de Prise en Charge Intégré des Addictions de Dakar (CEPIAD)*, the first centre in the whole of West Africa to offer integrated care, treatment and counselling services to injecting drug users. Expertise France also mobilised French hospital -and association-based expertise in dependence and infectiology through hospital partnerships, as well as French NGOs specialised in outreach activities and harm reduction. A South-South partnership was set up with Morocco, involving study trips, work placements and training for Senegalese delegations.

The 5% Initiative consolidated Expertise France's support by mobilising two experts to help define a pilot programme of integrated services for managing injecting drug users and dependence. Several partners, including Paris City Council and the Global Fund helped fund the CEPIAD's construction and purchase supplies and Expertise France provided funding for methadone to enable the centre to start dispensing substitution treatment. Lastly, in 2014, Dr Maryvonne Maynard was sent out by the 5% Initiative on a mission lasting several months to organise the CEPIAD's different services and put its operating procedures in place.

Thanks to all this support and the help of the National AIDS Control Programme, the CEPIAD was inaugurated on 1st December 2014. Its success was immediate. Within a year, the centre had treated **425 patients**, carried out more than **3,000 consultations** and was offering a **comprehensive care package** made up of medical and psychological care, social support, the daily dispensing of methadone and recreational activities (art therapy, gardening, literacy classes, theatre, etc.). **In 2017, there are more than 200 people on the methadone programme.**

Today, the CEPIAD has many challenges to meet, including developing a system for providing methadone for home use, decentralising its activity outside of Dakar, attracting more women who use drugs (today they represent only 10% of patients) and scaling up to the regional level in order to become a referral centre for West Africa.



TESTIMONY

"Now that I've joined the programme, everyone is happy. I don't bother my mum any more. My wife has come back... I'm beginning to feel good. The methadone programme has really saved us."



4. Survey to estimate the size of the IDU population living in the Dakar area), to assess HIV, HBV and HCV prevalence in this population and to analyze related behavioural risk factors in order to set up an integrated prevention and treatment programme Co-financing ANRS/Global Fund project of the Executive Secretariat/National AIDS Control Programme/Senegal.



HARM REDUCTION AND COMMUNITY MOBILISATION

In 2014, the French non-profit association, *Médecins du Monde* carried out a survey in Abidjan among 450 drug users to estimate the prevalence of HIV, hepatitis B and C virus, tuberculosis and syphilis among users of heroin and cocaine/crack - a highly vulnerable population because of their sexual risk taking and extremely precarious living conditions. The survey revealed that most drug consumption took the form of daily and concomitant inhalation of crack and heroin, with injection drug use very covert and only concerning a minority of people.

In light of the findings of this survey, *Médecins du Monde* responded to the 5% Initiative's call for proposals on "Key populations" with a project for improving access to health care for vulnerable drug users in Abidjan. The aim of this project is to strengthen the national response to HIV and tuberculosis for people who use drugs and ensure the Global Fund includes the specific needs of these groups in future concept notes on these diseases. Since 1st January 2015, Doctors of the World and its partners (*La Croix Bleue*, *Espace Confiance* and *ASAPSU*) have been strengthening the capacities of health personnel, encouraging community mobilisation, implementing advocacy activities and providing health care for drug users.

Thanks to this project, many national actors and programmes are now integrating the needs of people who use drugs into their actions. For example, the 2016-2017 national strategic plan to fight HIV/AIDS and tuberculosis includes the specific needs of drug users, as does the current revision of Côte d'Ivoire's drug trafficking and misuse law. Finally at the scientific conference on the prevention and treatment of drug use disorders organised by the UNODC in Abidjan, the Ministry of Health announced the launch of an opioid substitution treatment programme and the opening of treatment centres in Côte d'Ivoire.

PROJECT NAME

Access to health care for vulnerable drug users in Abidjan: towards a national policy adapted to needs

PROJECT LEADER

Médecins du Monde

COUNTRY OF IMPLEMENTATION

Côte d'Ivoire

TESTIMONY

"I'm Alexis, I'm 44 years old and I've been taking drugs since I was 11. My addiction cost me my wife and my job, and I also became infected with tuberculosis. *Médecins du Monde* regularly come to talk to us and provide us with treatment and counselling. They encourage us to join community-based organisations and self-help groups. I was asked to be a community focal point which enabled me to reach out to non-drug-using friends I'd lost touch with. Today, I'm seeing the doctor again and following a treatment programme. I started thinking about my relationship with my children and my position in society. Now I'm planning to go back to work and help young drug users".

TOWARDS REGIONAL MANAGEMENT OF PEOPLE WHO USE DRUGS IN WEST AFRICA



The regional concept note on "Reducing the risks of HIV, tuberculosis and co-morbidity in West Africa in injecting drug users" was drafted by the Senegalese NGO "Alliance Nationale de lutte Contre le Sida", in partnership with "Réseau Contact" (Switzerland) and other institutional and associative partners in the countries. The note's goal is to reduce vulnerability to HIV, tuberculosis and other co-morbidities (especially hepatitis B and C) among injecting drug users in five West African countries: Burkina Faso, Senegal, Côte d'Ivoire, Guinea Bissau and Cape Verde.

SUPPORT FOR PATIENTS ON HARM REDUCTION PROGRAMMES

In December 2013, Expertise France put in place an integrated opioid dependence management programme in an HIV clinic (Go Vap) in Ho Chi Minh City, Vietnam. Services include pharmacological treatment (methadone and buprenorphine/naloxone - Suboxone®), combined with counselling sessions, systematic HIV and hepatitis testing and an antiretroviral treatment for any patients who test positive. This programme is funded by a 5-year grant from the American agency, NIDA (National Institute on Drug Abuse) for the period August 2012-July 2017.

The programme notably aims to emphasise the importance of **providing patients on substitution treatment with psychological counselling** and dispense a **new opioid substitution treatment, Suboxone®**.

Suboxone®, taken as part of integrated medical, social and psychological care programme, treats adults dependent on opioids, such as opium, heroin or morphine. It replaces the physical effects produced by the drug on which the person is dependent, helping them to treat their addiction.

Vietnam began its substitution treatment programme with methadone in 2008. This project **introduced the use of Suboxone® in Vietnam for the first time**. It hopes to win government support for the potential use of different substitution treatments. The Vietnamese Health Ministry will draw on the project's final report to decide whether or not to authorise the use of Suboxone® nationally.



PROJECT NAME

Integrated Treatment
Program for Opiate
Addiction and HIV

PROJECT LEADER

Expertise France
(Hanoi Office)

COUNTRY OF IMPL- MENTATION

Vietnam

MAIN RESULTS

- Very high patient retention levels: 89.8% after 12 months
- Very good adherence to treatment: 94.3 % of doses taken
- 96.5 % of HIV positive patients on ARV treatment
- 90 % of participants stop taking opioids after 3 months of treatment charge

It aims to improve access to harm reduction services and promote the human rights of these people by:

- developing regional advocacy and training for the region's stakeholders on the need to develop and implement harm reduction policies based on scientific evidence;
- establishing an environment conducive to harm reduction interventions;
- developing innovative models and sharing regional experience of good harm reduction practices.

The challenge for this programme is to obtain high-level political engagement in promoting harm reduction strategies for injecting drug users in order to transform exclusion dynamics into integration dynamics.

The 5% Initiative supported the programme by sending three experts on two technical assistance missions to help the ANCS draft and negotiate this concept note. This support represented a volume of 192 expertise days.

PROJECT NAME

Innovative HIV/AIDS control strategies for young injecting drug users in Vietnam

PROJECT LEADER

SCDI

COUNTRY OF IMPLEMENTATION

Vietnam

INTERVENTIONS FOR YOUNG INJECTING DRUG USERS

According to the UNODC, young people more often seek treatment for disorders due to the use of cannabis and amphetamines than to than any other drugs. This reflects the increase in cannabis and amphetamine consumption among young people and hence in the number of young people seeking treatment for their use. People seeking treatment for disorders due to the use of opioids or cocaine are usually aged around thirty, as evidenced by the aging cohort of users under treatment and the overall reduction in the proportion of requests for treatment seen in many sub-regions.

The SCDI's "Saving the Future" project was selected as part of the 5% Initiative's 2015 call for proposals targeting adolescents and young girls. It is implementing a **harm reduction programme in 8 Vietnamese provinces for young people under the age of 20 who use drugs**. The SCDI plays a crucial pioneering role in Vietnam's fight to control HIV, bringing together networks of key populations who would otherwise have no structural or organisational support, and hosting a national civil society platform on HIV.

After completing an ambitious epidemiological study targeting young people (aged 16 to 24) affected by HIV, the SCDI intends to adapt innovative responses to contexts and populations and strengthen the capacities of local organisations, while encouraging the emergence of leadership from among the young people themselves. These young beneficiaries will thus become actors in creating and implementing the activities. This 3-year project, which has a budget of \$1 million, will target around 8,000 people in groups most exposed to HIV.

It will also close the gap created by current programmes which only address the needs of people who inject drugs and neglect those of young people who mostly use methamphetamine. The use of this stimulant by young people is a problem now shared by several countries and the "Saving the Future" project will help the scientific community move forward on it.



TESTIMONY

Tran Thuy Anh, a 17 year-old sex worker, is one of the project's beneficiaries. She believes that many sex workers think methamphetamine is an effective way of helping them work better, but they don't know enough about the risks attached to using this drug. She hopes that this project will help more young people like her.



TESTIMONY

“This project has changed the lives of women mentors and women mentees. For example, we helped one of our mentees to overcome her fear of antiretroviral treatment. She has at last started to take antiretrovirals and is also talking to her sex partner about using a condom.”

GENDER IN HARM REDUCTION PROGRAMMES: REACHING WOMEN

As most people who use drugs are men, the continuum of care often fails to cater adequately for the needs of female drug users, for whom access to such services may be insufficient. Women affected by drug dependence and HIV are even more vulnerable and more stigmatised than men⁵ and more likely to have been victims of violence and abuse.

In Ukraine, people who inject drugs (PWIDs) are the most affected by HIV, with a prevalence rate of 19.7%, or an estimated 62,000 PWID who are HIV positive. According to a bio-behavioural study conducted in 2013, prevalence is even higher in women who inject drugs (22.5%).

The project, launched in 2015 with a 5% Initiative grant, aims to **guarantee equal and quality access for injecting drug users (men and women) and their sexual partners to gender-sensitive care and prevention activities**. It has adopted an innovative structural approach for integrating gender issues, and more specifically harm reduction for PWIDs into HIV control strategies. Not only does it test new prevention and support strategies for women who inject drugs, but it also:

- trains large numbers of professionals from the medical-social sector in gender sensitivity, notably through its e-learning platform;
- encourages women who inject drugs to take part in prevention activities (participation in recruitment, mentoring of newly-recruits), which makes these activities more accessible to women and increases their adherence to the pilot project;
- disseminates the good practices that come out of the project to other community-based organisations and to the local authorities with the result that other key HIV control stakeholders are now taking ownership of the training programme and the innovations introduced by the project.

5. UNODC, World Drug Report 2016.

PROJECT NAME

Developing sexo-specific harm reduction intervention capacities in line with quality assurance standards in Ukraine

PROJECT LEADER

Alliance Ukraine

COUNTRY OF IMPLEMENTATION

Ukraine



PROJECT NAME

Underage, overlooked:
Improving access to integrated HIV services for adolescents most at risk in Ukraine

PROJECT LEADER

AFEW Ukraine

COUNTRY OF IMPLEMENTATION

Ukraine



UNDERAGE, OVERLOOKED: IMPROVING ACCESS TO INTEGRATED HIV SERVICES FOR ADOLESCENTS MOST AT RISK IN UKRAINE

This project seeks to reduce the HIV rate among adolescents who use drugs and their sex partners by promoting access to care and prevention services through:

- Improving access to care for adolescents who use drugs by designing specific interventions that involve them directly;
- Building the capacities of nine community-based organisations to provide care and treatment for adolescents who use drugs and their sex partners;
- Carrying out advocacy actions in order to improve legislation and remove the structural barriers preventing access to services for adolescents who use drugs.

This project is about to be signed and should start on 1st September 2017.



MORE INFORMATION ON:
www.expertisefrance.fr
www.initiative5pour100.fr



Expertise France is the French public agency for international technical assistance. It aims at contributing to sustainable development based on solidarity and inclusiveness, mainly through enhancing the quality of public policies within the partner countries. Expertise France designs and implements cooperation projects addressing skills transfers between professionals. The agency also develops integrated offers, assembling public and private expertise in order to respond to the partner countries' needs.



The 5% Initiative manages France's indirect contribution to the Global Fund to Fight AIDS, Tuberculosis and Malaria. The Initiative supports partner countries in designing, implementing, monitoring/evaluating and measuring the impact of grants allocated by the Global Fund via one-off technical expertise missions at the request of the country concerned and grants for long-term projects of two to three years' duration.